

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	E.H.		09-05-01
O.I.P.E. CLASSIFIER		12	9/12
FORMALITY REVIEW	CH	1119	10-03-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 -+ Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	✓ ✓
2	✓	✓	
3	✓	✓	✓ ✓
4	✓	✓	
5	✓	✓	✓ ✓
6	✓	✓	
7	✓	✓	
8	✓	✓	
9	✓	✓	✓ ✓ ✓
10	✓	✓	
11	✓	✓	✓ ✓ ✓
12	✓	✓	
13	✓	✓	✓ ✓
14	✓	✓	
15	✓	✓	
16	✓	✓	
17	✓	✓	✓ ✓ ✓
18	✓	✓	
19	✓	✓	✓ ✓ ✓
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21	✓	✓	✓ ✓
22	✓	✓	
23	✓	✓	
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25	✓	✓	✓ ✓ ✓
26	✓	✓	
27	✓	✓	✓ ✓ ✓
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29	✓	✓	✓ ✓
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48	✓	✓	
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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